

NURSING HOME SURVEYS

by

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THE SENATE FISCAL AGENCY

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INTRODUCTION

In fiscal year (FY) 1995-96 Governor Engler issued an executive order that transferred the Health Facility Licensing and Certification program from the former Department of Public Health (now the Department of Community Health) to what is now known as the Department of Consumer and Industry Services. The Division of Nursing Home Monitoring in the Bureau of Health Systems is currently responsible for conducting standard (annual) surveys of nursing homes in Michigan.

The issue of long-term care in the State is often debated in the Michigan Legislature. Issues regarding oversight of the level of care received in the State-licensed nursing homes and response time to complaints have led the discussions. In the spring of 1999, the Federal Government Accounting Office released a study that reviewed Michigan's complaint process, providing some negative feedback on the State's program and the lack of Federal oversight. This report intensified the discussions between the Department and the Legislature.

In response to these criticisms, the Department conducted its own review and identified as part of the problem, a loss of qualified survey staff (inspectors) following the early retirement plan for State employees instituted during 1997. The early retirement plan resulted in a loss of 10 experienced staff people, which in addition to the natural attrition rate within the Division depleted the number of filled inspector positions to 73 by the end of FY 1997-98 (compared with the 94 that were allocated). The process of replacing inspectors involves extensive training and certification which can take several months. As a result, the Department had accumulated a backlog of complaints that had reached as many as 400. In response, the Legislature appropriated 24 additional inspector positions over two consecutive fiscal years. For FY 1999-2000 and FY 2000-2001 there are a total of 118 FTE positions that have been appropriated for State inspectors. As of August 2000, 114 of these positions were filled.

This paper looks at Michigan's nursing homes from 1994 through 1998, with a primary focus on the Federally certified homes which make up 86% of all nursing homes in Michigan and are designated Medicare only, Medicaid only, or dually certified for both Medicare/Medicaid. These homes submit reports to the Federal Health Care Financing Administration and it is from these reports that the majority of the data for this paper were derived. Compilation of the self-reported data for all states is provided in a publication distributed by the University of California (UC). The UC report was funded by the Health Care Financing Administration. The paper also compares the characteristics of Michigan's homes including resident acuity, staffing levels, and resident payment types, with the characteristics of other states' nursing homes as well as the national average.

NURSING HOMES

In 1998, Michigan had 460 licensed nursing homes of which 446 were Federally certified and 13 are State-licensed only (private pay homes). The nursing homes housed approximately 52,000 residents in Michigan, with 38,000 residing in Federally certified homes and 14,000 residing in the private pay homes. Table 1 below shows the distribution for home ownership in Michigan as compared with the national average and Table 2 shows the distribution for resident payment type as compared with the national average¹. Michigan's distribution for these two categories is fairly consistent with the national averages.

Table 1

Percentage Distribution of Ownership Type of Federally Certified Nursing Homes				
	For Profit	Nonprofit	Government	Total
Michigan	61.9	27.9	10.2	100.0
National Average	65.0	28.5	6.5	100.0

Source: Nursing Facilities, Staffing, Residents, and Facility Deficiencies, 1992 Through 1998. Harrington, Carrillo, Thollaug, Summers, Wellin; Department of Social and Behavioral Science, University of California, January 2000.

Table 2

Percentage Distribution of Payment Type for Residents of Federally Certified Nursing Homes				
	Medicare	Medicaid	Private Pay/Other	Total
Michigan	12.1	66.5	21.4	100.0
National Average	9.3	67.4	23.3	100.0

Source: Nursing Facilities, Staffing, Residents, and Facility Deficiencies, 1992 Through 1998. Harrington, Carrillo, Thollaug, Summers, Wellin; Department of Social and Behavioral Science, University of California, January 2000.

NURSING HOME RESIDENTS

The measurement of the abilities of the residents in Michigan's Federally certified nursing homes in 1998, conducted by UC, provides insight into the type and amount of care that should be provided in Michigan's homes. The University of California study includes two different indices used to identify the characteristics of the resident populations in nursing homes. The first index scores three activities of daily living (ADL) by rating the amount of assistance needed with eating, toileting, and being transferred (e.g., from a bed to a chair). Nursing homes were asked to rate residents based on a scale of 1 to 3 with 1 being none or a small amount of assistance

¹Harrington, Carrillo, Thollaug, Summers, Wellin, Nursing Facilities, Staffing, Residents, and Facility Deficiencies, 1992 Through 1998. ; Department of Social and Behavioral Science, University of California, January 2000. pp. 17 and 18.

for each category and 3 being a lot of assistance or total dependence in each category. Each facility was given a case mix summary score and the data were further summarized to provide an average summary score for all facilities located in the State. The average summary score ranged anywhere from 3 to 9. For 1998, Michigan's average summary score was 5.7, which is identical to the national average. Thus, Michigan's resident population is consistent with the national average for level of care required to tend to the residents. The highest score was Virginia at 6.6 and the lowest was a tie among Iowa, Illinois, and Wyoming at 5.2².

The second index used is a management minute index that weights the number of residents with various ADL problems by the estimated number of minutes to care for someone with a specific problem. The index used various categories of assistance that ranged from an individual's being completely bedfast to having an inserted catheter or requiring eating assistance. The estimated time was then multiplied by the percentage of patients in a certified home with the specific need. These data were then summarized to provide an average resident acuity for the State. In Michigan, the average resident acuity for 1998 was 98.5 which compared with the national average of 99.2. The highest level was in Virginia at 124.2 and the lowest was in Nebraska at 72.4³.

STAFFING

Certified homes are required to maintain a certain level of nursing care, which is monitored by the Federal government through biweekly work reports. Each home must maintain a sufficient number of licensed nursing personnel on staff for three shifts. Sufficient staff is defined in the State statute, MCL 333.21720a, as a licensed Registered Nurse on staff for at least one eight-hour shift, seven days a week, and sufficient nursing staff to provide not less than 2.25 hours of nursing care per patient per day. Federally certified nursing homes are required to report total hours worked in a 14-day period. The UC study analyzed the data by reviewing the number of residents and then dividing the number of reported payroll nursing hours over the two-week period prior to a survey. Staff time included both full- and part-time nursing staff, as well as those performing administrative duties.⁴ A 24-hour period, or three shifts, is considered to be a resident day. The study differentiated between the different types of nursing staff and broke staff down into registered nurses (RNs), licensed practical /vocational nurses (LPN/LVNs), and nurses aides (NAs). The study further broke the homes down by payment type: Medicare only, Medicaid only, and Medicaid/Medicare dual certification, and grouped together into all Federally certified homes (Medicaid only, Medicare only, and the dually certified).

As shown in Tables 3-5, for 1998 the average number of RN hours per resident day for Medicare only homes in Michigan was 1.2 hours or 72 minutes, which was below the national average of 2.2 hours or 132 minutes. However, the staffing averages for both the Medicaid only and dually certified homes in Michigan are consistent with the national average during the same year. As a result, for all types of Federally funded nursing homes, registered nursing hours per resident day in Michigan were slightly below the national average.

²Ibid. pp. 33.

³Ibid. pp. 35.

The average number of LPN/LVN staffed hours per resident day in Medicare only homes in Michigan for the same year was .9 or 54 minutes compared to a national average of 1.3 hours or 78 minutes, and .6 in Medicaid only and dually certified homes, consistent with the national average. For the total Federally funded homes, LPN/LVN nursing hours per resident day in Michigan were just below the national average of .7 hour, with an average of .6 hour per resident day.

For NAs, the averages were consistently above the national average. For the Medicare only homes, Michigan averaged 2.6 hours compared with the national average of 2.2 hours per resident day. In the Medicaid only and dually certified homes, Michigan averaged 2.2 hours compared with the national average of 2.0 hours. This resulted in Michigan's average NA hours for all Federally certified nursing homes being slightly above the national average of 2.1 hours, at 2.2 hours per resident day.

Table 3

Average Nursing Hours per Resident Day - Medicare Only Facilities					
	1994	1995	1996	1997	1998
Registered Nurses					
Wyoming*	3.1	3.1	4.9	4.7	4.4
Michigan	0.4	0.5	0.7	1.3	1.2
National Average	1.9	1.9	1.9	2.1	2.2
Licensed Practical/Vocational Nurses					
North Dakota*	3.1	2.5	1.7	1.8	2.7
Michigan	1.0	0.9	0.8	0.8	0.9
National Average	1.6	1.4	1.3	1.3	1.3
Nurses Assistants/Orderlies/Aides					
New Hampshire*	2.6	2.5	2.2	2.8	4.0
Michigan	2.7	2.5	2.4	3.1	2.6
National Average	2.9	2.6	2.5	2.5	2.5

*State(s) with highest average in 1998

Source: Nursing Facilities, Staffing, Residents, and Facility Deficiencies, 1992 Through 1998. Harrington, Carrillo, Thollaug, Summers, Wellin; Department of Social and Behavioral Science, University of California, January 2000.

Table 4

Average Nursing Hours per Resident Day - Medicaid and Medicare/Medicaid Facilities					
	1994	1995	1996	1997	1998
Registered Nurses					
Arkansas*	0.9	0.9	1.1	1.1	1.2
Michigan	0.4	0.4	0.5	0.6	0.6
National Average	0.4	0.4	0.5	0.5	0.6
Licensed Practical/Vocational Nurses					
Alabama*	0.9	0.9	0.9	0.9	0.9
DC *	0.8	0.7	0.7	0.8	0.9
Michigan	0.6	0.6	0.6	0.6	0.6
National Average	0.6	0.6	0.6	0.6	0.6
Nurse Assistants/Orderlies/Aides					
Arkansas*	2.9	3.0	3.0	2.8	2.8
Michigan	2.2	2.2	2.2	2.2	2.2
National Average	2.0	2.0	2.0	2.0	2.0

*State(s) with highest average in 1998

Source: Nursing Facilities, Staffing, Residents, and Facility Deficiencies, 1992 Through 1998. Harrington,

Carrillo, Tholhaug, Summers, Wellin; Department of Social and Behavioral Science, University of California, January 2000.

Table 5

Average Nursing Hours per Resident Day					
Total Federally Certified Facilities - Medicaid Only, Medicare Only, Medicaid/Medicare					
	1994	1995	1996	1997	1998
Registered Nurse					
Arkansas*	0.9	0.9	1.1	1.1	1.2
Michigan	0.4	0.4	0.5	0.6	0.6
National Average	0.6	0.6	0.6	0.7	0.8
Licensed Practical/Vocational Nurse					
Alabama*	0.9	0.9	0.9	0.9	1.0
Mississippi*	0.9	1.0	0.9	0.9	1.0
Michigan	0.6	0.6	0.6	0.6	0.6
National Average	0.7	0.7	0.7	0.7	0.7
Nurse Assistants/Orderlies/Aides					
Maine*	2.6	2.7	2.8	2.8	2.9
Michigan	2.2	2.2	2.2	2.3	2.2
National Average	2.1	2.0	2.1	2.1	2.1

*State(s) with highest average in 1998

Source: Nursing Facilities, Staffing, Residents, and Facility Deficiencies, 1992 Through 1998. Harrington, Carrillo, Thollaug, Summers, Wellin; Department of Social and Behavioral Science, University of California, January 2000.

THE SURVEY PROCESS

All states have a contract with the Federal Health Care Financing Administration (HCFA) to monitor nursing homes providing services to Medicare and Medicaid beneficiaries. The Division of Nursing Home Monitoring enforces the Federal licensing standards established for Medicaid and Medicare purposes as provided in the Social Security Act (42 U.S.C. 1396r, Titles 18 and 19) for those homes as well as the State statute (MCL 333.21701 to 333.21799e). A home undergoes an inspection about every nine to 15 months.

There are four types of surveys that a Federally certified home could undergo. The first is a standard (annual) survey conducted every nine to 15 months. Surveyors review the quality of care, written plans of care, and compliance with residents' rights. Residents' rights include such things as privacy, confidentiality, freedom from restraints, and participation in resident and family groups. If the sampled group reveals that a facility may not provide adequate services or substandard care during the annual survey, the facility could be subject to an extended survey. An extended survey, the second type of survey, usually takes place immediately following the standard survey and involves an increase in the sample size as well as a review of the procedures practiced in the home to determine why a deficient rating has resulted. A facility may also undergo an abbreviated standard survey which is a focused survey following a complaint. Finally, there is a validation survey which is done by Federal investigators on a sample of the homes that received an annual survey. Validation surveys are required to be conducted within two months of an annual survey and are performed using the same protocols as the annual survey. Any facility found to be in noncompliance with a Federal validation survey, even if it was found to be compliant under the State survey, will be subject to citations and remedial action resulting from the Federal validation survey.

The makeup of the State survey team must be multidisciplinary and usually includes registered nurses, dietitians, sanitarians, and social workers. Other professions including engineers may be consulted if necessary. Surveyors are assigned to one of six regional area teams. All annual and follow-up surveys are performed by these teams in the respective regions. There is one complaint team in both Lansing and Detroit, and the northern survey team, Team F, responds to complaints within its region. A diagram outlining these regions is shown in [Figure 1](#). A validation survey may include a Federal team of surveyors doing a separate survey or a single Federal surveyor accompanying a State survey team.

Figure 1




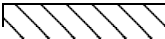
SURVEY CITATIONS

Citations for deficiencies are classified into a grid based on the scope and severity. The scope of a deficiency is defined as the number of residents who are or may be affected by a specific deficiency. Severity is defined as the seriousness of the deficiency on residents based on the impact of the care provided in a facility. Figure 2 below shows the grid surveyors use to classify levels of severity and scope of deficiencies.

Figure 2

Nursing Home Citation Grid			
Immediate Jeopardy To Resident Health or Safety	J	K	L
Actual Harm that is not Immediate Jeopardy	G	H	I
No Actual Harm with potential for More than Minimal Harm that is not Immediate Jeopardy	D	E	F
No Actual Harm with Potential for Minimal Harm	A	B	C
	Isolated	Pattern	Widespread

Source: Department of Consumer and Industry Services.

	Substantial Compliance
	Substandard Quality of Care

Homes with citations in box A, B, or C are considered to be in substantial compliance. Homes with citations in any other box are considered noncompliant. Homes found to have one or more deficiencies in squares F and H to L are found to meet the Federal definition for substandard quality of care. The number and severity of the deficiency(ies) determine the remedial action that will be taken by the State in attempting to bring a facility back into compliance with licensing standards. Any home found to be noncompliant may be subject to either Federal or State authorized remedial actions. Federal actions can include one or more of the following:

- 1) A denial of payment for new admissions
- 2) State monitoring
- 3) A temporary manager
- 4) An administrative advisor or clinical advisor, or both
- 5) A directed plan of correction
- 6) Directed in-service training
- 7) Civil monetary penalties
- 8) Closure of a home or the transfer of patients or both
- 9) Termination of a provider agreement
- 10) Denial of payment for all individuals (imposed directly by the HCFA)
- 11) Public notice that is required under state licensure authority.

- 12) Assignment of an administrative or clinical advisor to monitor or mentor the facility administrative or clinical staff until corrective action is complete

State actions, provided under the State licensure authority also may include one or more of the following:

- 1) A correction notice or order requiring a temporary administrative or clinical advisor
- 2) An emergency order limiting, suspending, or revoking a license
- 3) A notice of intent to revoke licensure
- 4) A correction notice or order to transfer selected patients, reduce licensed capacity, or comply with specific requirements
- 5) A correction notice or order requiring a temporary manager
- 6) State patient rights penalties

Remedial action depends not only on the number of deficiencies, and the scope and severity of the deficiencies, but the past performance by the home is considered as well. Facilities may be given 90 days to achieve substantial compliance unless a citation is considered serious and could put residents in immediate jeopardy. Facilities that do not abate an immediate jeopardy within 23 days are terminated from the program and if a facility remains noncompliant at 90 days a denial of payment for new Medicaid/Medicare admissions is imposed. If by 180 days the deficiency is not corrected, then the facility will be terminated from receiving all Medicaid/Medicare reimbursement. If a facility is cited with deficiencies in the "G" box of the grid for two surveys (annual or intervening survey including a complaint investigation), then no grace period is given to correct the deficiency and the licensure authority may immediately impose remedies, including a denial of reimbursements for new admissions. All immediate jeopardy citations in a Federally certified facility are referred to the HCFA and considered to be in violation of the Federal standards.

Homes also are given the opportunity to appeal a citation to the State Medicaid Agency within 30 days of receiving notice of the right to appeal or 60 days to HCFA in the case of Medicare only or dually certified homes. Any appeal delays the imposition of remedial action applied by the State unless the facility, as stated above, received a deficiency rating of "G" or above and during the appeals process is surveyed again and is cited for a deficiency rating "G" or above. This result allows the State immediately to take remedial action, including termination of reimbursement from Medicaid or Medicare. Additionally, an informal appeal process is available, as required in the Federal rules. In Michigan a nursing home can request a review of contested citations, which is called the Informal Deficiency Dispute Resolution process. The review is provided by the Michigan Peer Review Organization who have a contract with the State to perform this service. The organization assigns cases to a standing panel who review the contested claims.

SURVEY RESULTS

For the past five years Michigan has placed nationally in the top five states with the highest average number of deficiencies per certified nursing facility⁴. Tables 1-7 located in the Appendix show how Michigan rates compared with other states in the nation regarding citation levels.⁶

⁴Ibid. pp. 59.

The national average for citations per certified home in 1994 was 7.2 and it decreased to 5.2 for 1998. Comparatively, Michigan had an average citation rate of 13.3 in 1994 and decreased to 9.3 in 1998. This is almost twice the national average for the number of citations. In addition, Michigan is one of the bottom four states having the lowest percentage of facilities found to have no deficiencies. The national average in 1994 was 12.6% facilities with no deficiencies and it increased to 18.9% in 1998. Michigan, however, had only 0.4% in 1994, and increased to 3.1% in 1998, well below the national average.

When considering the 10 most frequently cited deficiencies⁵, from 1995 through 1998, Michigan appears as one of the top citing states in at least six out of 10 citation categories. The top deficiencies have changed slightly over the four years but the most common citations are food sanitation, comprehensive assessments, comprehensive care plans, accidents, and pressure sores. Michigan ranks in the top citing states in three of these categories: food sanitation, accidents, and pressure sores.

As stated previously, just a citation for a deficiency is not solely indicative of the type of care that is provided in an institution. A citable incident could be isolated and involve very few or even one resident of a facility. A breakout of the 1998 citations show that 80.64% of the citations fall in the categories which are below the Federal Standard for quality of care, or boxes A through E and G. The remaining 19.36% fall under the Federal definition of substandard quality of care. Of the total citations, 87.53% fall in the lowest two severity rows or boxes A through F.

RECENTLY IMPLEMENTED PROGRAM CHANGES IN MICHIGAN

Michigan has implemented an early review process as a deterrent against substandard performance and repeated violations. The main feature of this process is a computer-driven scoring program that takes into consideration the results of the most recent survey, the number of complaints filed and substantiated against the home, and the level of difficulty required for the home to remedy any cited deficiencies. Homes that score one standard deviation from the Statewide average are subject to early intervention usually resulting in remedial action against the facility prior to the first revisit.

Michigan also has entered into a contract with the Michigan Public Health Institute (MPHI), a private not-for-profit organization specializing in public health issues, for it to act as a consultant for those homes that are found to be noncompliant, referred to as the Resident Protection Initiative. Following a survey, the State may order a facility to work with the MPHI and require that the cost of the services be paid by the facility. The MPHI is most often used in homes that are found to be in noncompliance and are restricted by the Federal requirements from being provided with a grace period to rectify any citations. The MPHI provides directed service training and placement of temporary managers or clinical advisors in the facility. Consultation and oversight by the MPHI continue for up to six months after the facility achieves substantial

⁵Each citation category is given a number preceded by the letter F, and is therefore referred to as an F-Tag. The definition of the citation categories and the F-Tag number are provided in the Appendix.

compliance. Homes are not prohibited from entering into agreements with the MPHI or other entities independently to prevent a negative survey result.

Another change recently implemented by the Department includes the creation of a Quality Improvement Nurse program. This program is based on a model used in the State of Washington in which nurses go out to facilities that are considered borderline or average based on recent survey results, or at the request of a facility. The nurses provide management support and training programs in order to prevent the home from becoming substantially noncompliant. Support efforts include Continuous Quality Improvement training, staff retraining, and technical assistance. These nurses operate solely as consultants and do not have the ability to cite a facility for violations of Federal and state standards.

Finally, in FY 2000, the former Continuous Quality Improvement Program, a Federal matching grant program, was transferred from the Department of Community Health to the Department of Consumer and Industry Services. This program, which has been appropriated \$10 million annually, provides competitive grants to nursing homes for quality improvement programs. The grant program funds programs in three different categories. The first, the Quality Leadership Award, is awarded for quality improvement initiatives based on the Baldrige Award Process. The second are awards for innovative projects that improve the level of care. Finally, the third funds Eden Alternative Projects which improve the nursing home environment by making it less institutional and more habitable. Three additional nursing staff were appropriated for FY 2001 to administer the grant program and provide information on best practices. Applications for grant awards for FY 2000 were approved for 347 applicants.

CONCLUSION

As one can see from the above data, Michigan's certified nursing homes are on average with those nationally in terms of resident population and characteristics. Staffing levels are not below average, acuity levels of residents are not high, and the distributions for payment type are consistent. A comparison of survey results has revealed that Michigan places in the top tier of citations for the most frequently cited violations and has the lowest percentage of homes receiving no citations. The data was only available through 1998, which was prior to the increased staffing authorization. A follow-up analysis of FY 2000 and FY 2001 citation results would need to be conducted to determine if more inspectors will result in measurable changes in the citation levels in these homes.

APPENDIX

Table 1

AVERAGE # OF DEFICIENCIES PER CERTIFIED NURSING FACILITY BY STATE									
1994		1995		1996		1997		1998	
HI	18.4	NV	15	NV	12.7	NV	14.3	NV	14.2
NV	17.2	MI	13.6	CA	10.7	CA	10.7	CA	10.4
CA	16.2	CA	11.7	MI	9.8	MI	8.6	DE	10.1
WY	14.4	HI	9.7	DE	9.5	WA	8.4	MI	9.3
MI	13.3	AR	8.1	AR	8.2	SC	7.9	WA	8.6
MS	10.8	MS	8	WA	7.5	ND	7.9	SC	7.9
MT	9.6	IL	7.9	SC	7.3	AR	7.5	HI	7.8
DC	9.4	IN	7.4	ND	6.6	DE	7.3	IN	7.8
IL	8.5	WA	7.3	IN	6.5	ID	7.1	ND	7.4
ID	8.5	TN	7.2	AL	6.4	IN	6.8	AR	7.3
WV	8.3	MT	7.2	ID	6.3	HI	6.6	FL	7.2
WA	8.1	VT	7.2	IL	6.2	FL	6.4	ID	7.1
TX	7.9	WY	7.2	KS	6.2	WY	6.3	KY	6
LA	7.8	AZ	7.1	FL	6.1	AL	6.1	AZ	6
IN	7.7	FL	7	DC	6.1	IL	6	AL	5.9
TN	7.6	AL	6.7	TN	5.9	WV	5.7	IL	5.8
AR	7.5	OH	6.6	MT	5.7	KS	5.5	WV	5.7
AL	7.4	DE	6.6	AZ	5.7	AZ	5.1	MT	5.6
OH	7.3	WV	6.5	OR	5.2	IA	4.8	KS	5.1
DE	7.2	KS	6.5	HI	4.8	OR	4.7	DC	4.7
VT	7.1	LA	6.3	OH	4.8	DC	4.6	OH	4.6
AZ	7.1	ID	6.1	MS	4.8	OK	4.2	OR	4.6
KS	6.8	DC	6.1	LA	4.7	TX	4.2	NC	4.6
FL	6.8	TX	5.9	WV	4.6	LA	4.2	MS	4.6
MN	6.8	OR	5.6	NH	4.4	OH	4	WY	4.6
SC	6.4	MN	5.3	UT	4.4	MS	3.9	IA	4.6
ND	6.2	SC	5.2	SD	4.3	AK	3.6	NM	4.5
GA	6.1	GA	5	MO	4.2	MO	3.6	TX	4.2
OR	5.9	UT	5	TX	4.1	WI	3.5	MO	4.1
NC	5.8	NC	4.8	IA	4	MT	3.5	UT	4
PA	5.4	ND	4.8	OK	4	NC	3.4	WI	3.9
UT	5.2	OK	4.7	NC	4	RI	3.4	PA	3.8
MO	4.8	MA	4.6	VA	3.8	NH	3.3	TN	3.7
MA	4.7	SD	4.5	NE	3.6	SD	3.3	SD	3.7
NM	4.7	MD	4.1	GA	3.3	UT	3.2	LA	3.7
NE	4.7	KY	4.1	MA	3.2	KY	3.2	OK	3.7
OK	4.6	MO	4.1	PA	3.1	PA	3.2	RI	3.6
ME	4.5	NJ	4	WY	3.1	VA	3.1	GA	3.6
SD	4.4	ME	4	WI	3	ME	2.7	MN	3.6
RI	4.4	PA	3.8	RI	2.9	MN	2.7	VA	3.5

Table 1

AVERAGE # OF DEFICIENCIES PER CERTIFIED NURSING FACILITY BY STATE									
1994		1995		1996		1997		1998	
AK	4.3	IA	3.8	MN	2.9	MA	2.6	ME	3.3
IA	4	NM	3.7	NY	2.7	NE	2.6	AK	3.2
MD	4	RI	3.6	CO	2.6	GA	2.6	NE	3
NJ	3.8	NE	3.5	MD	2.6	TN	2.6	MA	2.8
CT	3.7	WI	3.4	NJ	2.6	NJ	2.4	NH	2.7
WI	3.6	VA	3.4	ME	2.4	CO	2.3	CT	2.7
VA	3.6	AK	3.2	KY	2.3	NY	2.2	MD	2.4
KY	3.1	NY	3.1	AK	2.2	MD	2.2	CO	2.2
NH	2.7	CO	2.4	VT	2.1	CT	2.1	NY	2
CO	2.5	CT	2.3	NM	1.7	NM	1.8	VT	2
NY	2.5	NH	2	CT	1.5	VT	1.8	NJ	1.9
US	7.2		6.1		5.1		4.9		5.2

Source: *Nursing Facilities, Staffing, Residents, and Facility Deficiencies, 1992 Through 1998*. Harrington, Carrillo, Thollaug, Summers, Wellin; Department of Social and Behavioral Science, University of California, January 2000.

Table 2

PERCENT OF FACILITIES WITH NO CITATIONS									
1994		1995		1996		1997		1998	
WY	0	MT	0	NV	0	NV	0	DC	0
HI	0	NV	0	HI	2.5	MI	2.7	CA	1.8
MI	0.7	DC	0	DE	2.7	WY	2.8	HI	2.3
CA	1.2	MI	1.4	MI	3.7	CA	3	MI	3.1
MT	3.1	AZ	2.7	CA	4	AR	3.9	WA	4.4
WV	3.1	CA	3.3	AZ	4.9	ND	4	AR	4.7
ND	3.7	HI	4.8	AR	6.6	WA	4.7	SC	4.9
IL	4	VT	5	SC	6.7	AZ	5.9	AZ	6.2
AR	4.1	WY	5.3	ND	8.1	SC	6.3	ID	6.3
DC	5.6	KS	5.4	IL	9	IL	6.9	ND	6.8
VT	5.6	IL	5.5	WA	9.4	AL	7.1	WV	7.3
SC	6	AR	5.8	TN	9.9	ID	7.8	NV	7.3
UT	6.7	SC	7.1	ID	10.8	DC	9.1	IN	7.4
DE	7	AL	7.1	DC	11.1	HI	9.5	DE	7.4
OH	7.1	TN	7.3	KS	11.3	IN	9.5	AL	7.4
WA	7.4	IN	7.5	IN	11.9	WV	10.3	IL	7.9
NV	7.5	ID	7.5	AL	12	FL	11	FL	10.5
MN	7.6	WA	8.9	UT	13.9	KS	11.4	MT	10.9
ID	7.7	WV	9	MT	14	DE	11.9	SD	11.6
AL	7.9	UT	9.2	WV	14.5	IA	17.9	WY	12.5
TN	8.1	MN	9.7	FL	15.2	WI	20.8	ME	13.6
IN	8.2	ME	10.4	OH	17.2	AK	21.4	KY	13.8
SD	8.5	FL	10.5	SD	19	SD	21.8	IA	15.8
KS	8.6	OH	10.6	LA	20.3	MT	22.1	MS	16
TX	9.5	DE	12.1	VT	21.6	OH	22.2	PA	19.5
NC	10.6	MS	12.6	NC	22.7	RI	22.8	KS	19.5
FL	10.9	TX	14.2	NH	22.9	TX	23.2	TX	20.1
MS	11.1	AK	15.4	TX	23.2	LA	23.2	WI	20.5
PA	11.6	LA	15.6	OR	24	UT	24.2	AK	21.4
AZ	11.9	OR	16	MS	24.7	PA	25	RI	21.4

Table 2

PERCENT OF FACILITIES WITH NO CITATIONS									
1994		1995		1996		1997		1998	
ME	13	ND	16.9	OK	24.8	OK	25.3	TN	21.8
NE	13.1	GA	17.3	IA	24.9	OR	26.3	OR	21.9
LA	14.1	NC	17.9	RI	26.7	MS	27.9	NM	22.7
GA	14.8	RI	19.5	MN	27.4	MN	28.6	OH	22.9
RI	15.2	SD	19.8	WI	27.5	NH	29.3	MO	23
OR	15.3	OK	20.4	PA	27.8	MO	29.6	GA	23.4
NM	15.6	PA	21.4	MO	28.2	TN	29.9	UT	23.6
MA	16.7	WI	22	WY	29.7	GA	32.1	CT	23.6
CT	18	MA	22.9	NE	29.7	ME	32.8	MN	25.2
WI	18.6	NE	24.8	AK	31.3	CT	33.6	NC	25.7
OK	19.1	IA	25.7	NY	31.4	NC	34.8	OK	28.3
AK	21.4	MO	25.8	ME	32	NY	35.3	LA	30.4
MD	21.5	VA	27.3	CO	33.7	VA	36.3	VA	32
IA	23.9	NY	27.6	GA	34.3	MD	36.7	VT	32.4
VA	24.7	NJ	27.7	MD	34.8	VT	37.8	NE	34.4
MO	27.4	NM	29.9	MA	36	NJ	42.5	CO	34.9
CO	28.4	MD	30.1	VA	36.7	CO	42.8	MD	37.4
NJ	28.9	CO	31	NJ	36.9	NE	42.9	NH	38.7
NY	31.5	CT	37.1	CT	46.5	MA	47.8	NY	39.6
KY	37.8	NH	38.9	NM	48.1	KY	49.2	MA	41.3
NH	43.3	KY	44.9	KY	56.4	NM	57.1	NJ	47.7
US	12.6		15.2		20.8		21.6		18.9

Source: Nursing Facilities, Staffing, Residents, and Facility Deficiencies, 1992 Through 1998. Harrington, Carrillo, Thollaug, Summers, Wellin; Department of Social and Behavioral Science, University of California, January 2000.

Table 3

TOP TEN MOST FREQUENTLY CITED DEFICIENCIES BY STATE FOR CERTIFIED FACILITIES																			
CALENDAR YEAR 1995																			
Food Sanitation		Comprehensive Assessments		Comprehensive Care Plans		Accidents		Pressure Sores		Dignity		Physical Restraints		Housekeeping		Accommodate Needs		Incontinence Care	
DC	61.5	ME	64.3	HI	64.3	IL	36.9	NV	41.7	DC	46.2	NV	72.2	DC	76.9	HI	52.4	WY	47.4
NV	61.1	VT	57.5	CA	53.4	MI	34.7	MI	37.4	CA	44.1	HI	38.1	MI	43.2	CA	40.7	AL	35.4
AZ	49.1	MI	55.7	WY	50	MS	34.2	WY	34.2	WY	42.1	SC	35.1	KS	38.2	NV	38.9	MI	32
MI	47.8	TN	52.7	ME	47	OH	32.9	WA	27.1	NV	41.7	AL	32.8	NV	33.3	MI	28.4	NV	27.8
CA	42	AL	51.5	MI	43.4	WV	31.3	IA	25.5	HI	40.5	MI	27.3	AR	31.9	UT	22.4	SC	24.7
TN	41	OR	50.7	AL	42.4	AR	30	AR	25	AZ	28.8	MT	25	WV	28.4	TN	22	FL	20.7
WY	39.5	NV	50	NV	41.7	WA	27.9	MT	25	UT	27.6	CA	24.8	MS	28.1	WA	20.8	NC	19.9
IL	38	AZ	48.2	AZ	41.1	DE	27.3	MS	24.1	VT	27.5	SD	24.3	TX	27.9	IL	18.6	AR	18.8
OH	32.6	HI	47.6	KS	37.4	UT	26.3	OH	23.5	WA	24.5	DE	24.2	IL	27.8	WV	17.9	WA	18.6
UT	31.6	IN	47.08	TN	37.3	SD	26.1	AL	22.7	MI	24.3	UT	23.7	WA	25.3	ID	17.5	MT	18
TX	30.8	MN	44.5	ID	36.3	CA	26	CT	21.5	IL	23.8	KS	23.6	CA	23.6	NJ	17.5	MN	16.8
WA	30.5	MA	44.2	FL	33.6	AZ	24.1	ID	21.3	TN	23.3	OK	23	OH	23	OH	17.1	IL	16.8
MS	30.2	RI	42.7	DE	33.3	IN	24.1	KS	20.3	NJ	20.8	TN	22.7	WY	21.1	ND	16.9	MA	16.3
SC	29.9	SD	42.3	NJ	32	AK	23.1	CA	19.1	MS	20.6	OH	21.8	LA	20.5	FL	16.3	IA	16.3
GA	29.5	IL	41.6	AK	30.8	DC	23.1	MD	18.8	OH	19.9	FL	21.3	ID	18.8	TX	15.4	KS	15.1
KS	28.7	MS	41.2	MS	30.7	KS	21.5	MO	18.3	FL	19.7	VA	20.6	TN	18.3	AL	14.1	CA	14.5
HI	28.6	KS	41	IL	29.3	TN	20.7	NM	16.9	ID	18.8	AZ	20.5	AZ	17.9	OR	14	UT	14.5
RI	28	WY	39.5	NC	29	TX	20.4	NE	16.8	GA	18.4	PA	19.7	IN	17	MS	13.1	TN	14
DE	27.3	WA	38.7	OH	27.6	NV	19.4	ND	15.7	SC	18.2	AR	19.6	GA	16.7	ME	13	OH	13.9
AR	26.9	AK	38.5	IN	27.5	GA	19.3	AK	15.4	IN	18	NM	19.5	WI	13.3	PA	12.5	KY	13.7
NM	26	NC	37.3	SD	26.1	AL	19.2	DC	15.4	MN	16.6	ID	18.8	MO	12.5	MA	12.4	DE	12.1
IN	25.4	CA	36.6	MO	23.9	CO	17.7	OR	15.3	WV	16.4	MN	17.9	UT	11.8	VA	12.2	MO	11.3
ME	24.3	FL	35.3	NH	22.2	WI	16.5	VT	15	KS	16.4	VT	17.5	FL	11.8	MT	12	GA	11
FL	23	OH	34	AR	21.2	WY	15.8	LA	14.7	MD	16.1	IL	17.2	NJ	11.2	NE	11.9	MS	10.6
VT	22.5	ID	33.8	LA	21.1	ME	15.7	TX	14.6	NY	15.9	MA	17.1	MT	11	AR	11.9	VT	10
LA	22.3	MT	33	WA	20.8	MN	15	SC	14.3	NC	15.3	NC	17.1	ND	10.8	WY	10.5	ND	9.6
NC	22.3	WI	32	KY	20.1	OR	14	CO	14.3	OR	15.3	NY	17	KY	10.7	VT	10	IN	8.4
MO	20.3	NH	27.8	OR	20	SC	13.6	HI	14.3	ME	14.8	NE	16.8	ME	10.4	NM	9.1	TX	8
ID	20	IA	25.7	MT	20	PA	12.7	NY	13.7	ND	14.5	IN	14.1	PA	10.2	MN	8.7	WI	8
SD	19.8	MO	25.2	SC	19.5	VT	12.5	IL	12.7	AL	14.1	MS	13.6	OR	10	SC	8.4	DC	7.7
ND	19.3	AR	21.5	VT	17.5	NY	11.9	SD	12.6	LA	14.1	RI	13.4	OK	9.7	NH	8.3	HI	7.1
WV	17.9	DE	21.2	WI	16.3	VA	11.8	TN	12.3	PA	13.4	WV	13.4	NC	9.6	IA	8	LA	7
MN	17.9	GA	21	TX	16	NM	11.7	MN	11.8	MO	13.1	LA	13.1	RI	8.5	IN	7.8	OR	6.7
VA	17.6	KY	20.9	PA	15.9	OK	10.7	IN	11.7	AR	12.7	MO	13.1	NY	8.4	DC	7.7	NE	6.6
OK	17	CO	19.2	NE	15	MT	10	OK	11.2	VA	12.6	KY	12.8	NH	8.3	AK	7.7	NM	6.5

Table 3

TOP TEN MOST FREQUENTLY CITED DEFICIENCIES BY STATE FOR CERTIFIED FACILITIES CALENDAR YEAR 1995																			
Food Sanitation		Comprehensive Assessments		Comprehensive Care Plans		Accidents		Pressure Sores		Dignity		Physical Restraints		Housekeeping		Accommodate Needs		Incontinence Care	
IA	16	SC	18.8	NM	14.3	MD	9.7	NJ	10.9	SD	11.7	IA	12.4	MN	8.2	KS	7.7	ID	6.3
MT	15	WV	16.4	NY	13.2	LA	9.5	FL	10.5	TX	11.4	OR	12	AK	7.7	GA	6.8	NH	5.6
NY	14.8	CT	15.9	MA	13	FL	8.8	KY	10.3	MT	11	WA	11.9	VA	7.6	NC	6.7	ME	5.2
KY	14.5	ND	15.7	MN	12.4	NE	8.4	PA	10.2	NM	10.4	ND	10.8	VT	7.5	MD	6.5	PA	4.8
AL	13.6	LA	15	OK	12	MO	8.3	NC	9.8	KY	9.4	TX	10.2	DE	6.1	LA	6.4	MD	4.8
NE	12.4	NJ	12.9	RI	11	MA	8.1	MA	9.7	DE	9.1	MD	9.7	NE	5.8	SD	6.3	CO	4.4
PA	12.3	TX	12.3	VA	10.5	IA	6.8	ME	9.6	MA	8.7	ME	9.6	MD	5.4	WI	5.3	RI	3.7
OR	11.3	NE	10.6	MD	10.2	ID	6.3	GA	9.1	NE	8	WI	8.8	MA	5.2	KY	4.7	CT	3.6
MD	10.8	NM	10.4	IA	9	RI	6.1	DE	9.1	AK	7.7	GA	8.8	AL	5.1	CO	4.4	OK	3.1
MA	10.1	PA	9.5	GA	7.9	NC	6	RI	8.5	WI	6.3	NJ	8.6	CO	4.9	MO	3.8	NJ	3
CO	9.9	DC	7.7	CO	7.9	CT	6	NH	6.9	OK	6	NH	8.3	IA	4.4	NY	3.7	NY	1.8
WI	8.8	OK	4.7	DC	7.7	NH	5.6	WV	6	RI	4.9	AK	7.7	SD	2.7	OK	3.4	VA	1.3
NJ	8.6	NY	4.4	WV	6	HI	4.8	VA	5.5	CO	4.9	CT	6	SC	1.9	DE	3	SD	0.9
CT	5.6	MD	3.8	UT	5.3	KY	4.3	UT	5.3	IA	4.9	WY	5.3	NM	0	AZ	2.7	AZ	0.9
NH	1.4	UT	2.6	ND	4.8	NJ	4	WI	4.3	CT	4	CO	3	HI	0	CT	2.4	WV	0
AK	0	VA	1.7	CT	4	ND	2.4	AZ	2.7	NH	0	DC	0	CT	0	RI	0	AK	0
29		24.8		24.6		18.3		17.7		17.3		16.9		15.6		14.2		12.1	

Source: Nursing Facilities, Staffing, Residents, and Facility Deficiencies, 1992 Through 1998. Harrington, Carrillo, Thollaug, Summers, Wellin; Department of Social and Behavioral Science, University of California, January 2000.

Table 4

TOP TEN MOST FREQUENTLY CITED DEFICIENCIES BY STATE FOR CERTIFIED FACILITIES																			
CALENDAR YEAR 1996																			
Food Sanitation		Comprehensive Assessments		Comprehensive Care Plans		Accidents		Pressure Sores		Quality of Care		Physical Restraints		Housekeeping		Dignity		Unnecessary Drugs	
DC	66.7	HI	57.5	CA	47.3	DE	45.9	MI	35.8	NV	43.6	NV	59	DC	61.1	CA	40.9	SD	36
NV	59	SD	54	DE	45.9	AZ	44.4	KS	30.5	OR	36.4	CA	25.9	AR	39.5	NV	38.5	MI	32.6
AZ	51.4	AK	50	AL	45.2	AR	35.9	AR	29.3	WA	32.6	SC	25.5	AZ	33.1	HI	25	SC	27.3
DE	43.2	TN	44.1	NH	41.4	MI	30.9	WA	28.8	ID	32.4	MI	23.8	KS	30.2	SC	24.8	CA	26.6
MI	42.3	AL	39.4	NV	41	UT	30.4	SC	26.1	DE	32.4	ND	23	MI	30.2	DE	24.3	NV	23.1
CA	41.9	IN	38.3	HI	37.5	IL	30.1	ND	24.1	AR	28.5	MA	22.6	IL	26.1	ND	24.1	ID	21.6
AR	39.5	IL	37.8	SD	35	IN	29.6	AL	22.6	MD	27.5	AL	22.1	CA	26	NC	20.8	TN	21.6
IL	34.8	OR	37.7	AR	32.8	CA	27.8	DC	22.2	CA	22	SD	22	WA	25.8	FL	19.8	AR	20.3
ID	33.8	MS	36.3	SC	32.7	KS	27.7	OR	22.1	SC	21.8	DE	21.6	NV	25.6	AZ	19.7	NH	18.6
HI	32.5	NV	35.9	TN	29.6	WA	27	IA	21.2	KS	21.2	MT	19.4	IN	25.3	WA	19.5	AL	16.8
WA	31.5	CA	32.5	FL	28.8	MS	26.3	SD	21	MI	21.2	WA	19.1	ID	24.3	IL	18.6	NC	15.8
SC	31.5	NH	31.4	KS	28	OH	25.8	CA	20.5	CO	18.4	VT	18.9	TX	24	UT	17.7	KS	15.3
KS	29.7	WA	30	ME	28	ID	25.7	NH	20	MT	18.3	PA	18.6	MS	23.7	DC	16.7	IA	13.5
TN	28.7	FL	29.4	DC	27.8	NV	25.6	NE	19.7	WV	18.2	OK	17.9	ND	23	OR	14.9	AZ	13.4
IN	28.6	AR	28.9	IN	26.6	SC	21.2	CO	18.9	GA	18.1	FL	17.1	TN	18.5	TN	14.8	IN	12.6
LA	26.1	SC	28.5	IL	25.8	MT	18.3	OH	18	NE	17.5	AZ	16.9	GA	17.6	MI	14.4	FL	12.1
UT	25.3	KS	28.5	VA	22.6	CO	17.9	IN	18	CT	15.4	VA	16.7	NC	14.8	MN	14.2	MT	11.8
OH	24.5	MA	28.4	MS	22.1	AL	15.9	NV	17.9	TX	14.6	TN	16.4	OH	14.1	AL	13.9	MS	11.6
AL	24.5	WI	28.3	MO	21.5	SD	15	MT	17.2	NC	13.4	OH	16.1	WI	12.6	MO	13.2	ND	11.5
GA	24.4	AZ	28.2	WA	21	WY	13.5	FL	14.5	WI	13.1	IL	15.3	OK	11.6	IN	13	VT	10.8
WY	24.3	RI	27.9	OH	20	TX	13.3	MS	14.2	UT	12.7	ID	14.9	MO	10.7	NY	12.2	DE	10.8
TX	23.9	MN	25.4	ID	18.9	GA	13	IL	14	AK	12.5	KS	14.1	UT	10.1	OH	12.1	LA	10.6
ND	23	OH	24.6	AK	18.8	PA	12.3	TN	13.9	TN	12.3	MN	13.7	NH	10	NJ	12	CO	10
FL	21.7	CO	24.2	AZ	18.3	TN	12	VA	13.5	VA	11.5	WI	13.4	NY	8.4	VA	10.3	WA	9.7
MS	21.1	ND	24.1	LA	17.9	DC	11.1	DE	13.5	PA	11.4	OR	13	FL	8	KS	9.9	PA	9.3
WV	20.9	ID	23	PA	16.8	IA	11	MO	13.2	LA	10.9	AR	11.7	VA	7.9	LA	9.7	RI	8.1
OK	20.3	ME	20.8	WY	16.2	VA	10.7	CT	12.3	IL	10.6	IN	11.7	IA	7.7	ID	9.5	HI	7.5
ME	20.2	MO	20.5	NE	15.7	NY	10	NY	12.2	NH	10	WV	10.9	SC	7.3	AR	9.4	NE	7.4
MO	20.1	MT	19.4	MT	15.1	WI	9.8	OK	11.9	OH	10	MO	10.7	LA	6.7	GA	9.3	NJ	7.3
IA	18.6	IA	19.1	WI	14.1	RI	9.3	MN	11.5	IA	9.1	MS	10	ME	6.4	WV	9.1	ME	7.2
NC	18.6	VT	18.9	NJ	14	ME	8.8	PA	11.5	MN	8.9	HI	10	NJ	6.3	MS	8.9	OR	7.1
RI	16.3	WY	16.2	ND	13.8	MO	8.7	VT	10.8	NJ	8.6	KY	10	RI	5.8	NM	8.9	WI	6.9
CO	15.8	MI	15.6	MI	13.4	NH	8.6	TX	10.3	VT	8.1	NY	9.7	MD	5.8	NE	8.7	IL	6.8
SD	13	NC	15.3	KY	12.5	NC	8.5	GA	9.6	WY	8.1	ME	9.6	PA	5.4	WY	8.1	MO	6.7
VA	11.9	DE	13.5	NY	12.2	OR	8.4	NC	9	ND	8	NC	9.6	WY	5.4	PA	7.5	OH	6.4

Table 4

TOP TEN MOST FREQUENTLY CITED DEFICIENCIES BY STATE FOR CERTIFIED FACILITIES CALENDAR YEAR 1996																			
Food Sanitation		Comprehensive Assessments		Comprehensive Care Plans		Accidents		Pressure Sores		Quality of Care		Physical Restraints		Housekeeping		Dignity		Unnecessary Drugs	
OR	10.4	KY	12.1	WV	11.8	FL	8.4	UT	8.9	FL	8	NE	9.6	AL	5.3	CO	7.4	MA	5.6
MD	10.1	DC	11.1	OR	11.7	NE	7	MD	8.2	MS	7.9	NM	8.9	OR	5.2	MD	7.2	DC	5.6
NY	10	OK	10.6	NC	10.7	NM	6.3	LA	8.2	NY	7.7	IA	8.6	CO	4.7	ME	7.2	WV	5.5
PA	9.6	NJ	10.3	OK	10.3	OK	5.8	WY	8.1	AZ	6.3	RI	8.1	MT	4.3	IA	7	UT	5.1
NH	8.6	CT	9.6	TX	9.8	VT	5.4	WI	7.7	DC	5.6	UT	7.6	SD	4	SD	7	KY	5
MN	8.1	LA	9.1	IA	9.1	MN	5.3	HI	7.5	MO	5.1	TX	6.9	NE	3.9	MT	6.5	MN	4.7
MT	7.5	WV	8.2	CO	8.9	LA	4.8	RI	7	AL	4.3	CO	6.8	KY	3.2	OK	6.3	TX	4.7
KY	7.5	GA	7.9	MA	6.4	MD	4.8	MA	6.6	IN	3.7	MD	6.3	MA	2.7	CT	6.1	NY	4.1
NJ	7	TX	6.3	UT	6.3	WV	4.5	NM	6.3	KY	3.2	NJ	5.6	CT	2.6	VT	5.4	VA	2.8
NE	6.6	NE	6.1	NM	6.3	NJ	3	ME	5.6	SD	3	LA	4.8	HI	2.5	WI	5.1	OK	2.1
NM	5.1	VA	5.2	CT	6.1	MA	2.9	ID	5.4	MA	2.7	NH	4.3	MN	1.4	KY	5	MD	1.9
WI	5.1	UT	5.1	RI	5.8	CT	2.6	NJ	4.7	NM	2.5	GA	2.5	NM	1.3	MA	4.6	GA	1.7
CT	3.5	PA	5	MD	5.3	KY	2.5	WV	4.5	ME	2.4	CT	1.8	WV	0.9	TX	4.1	NM	1.3
MA	3.5	NY	4.1	VT	2.7	ND	1.1	AZ	4.2	RI	2.3	AK	0	VT	0	NH	1.4	CT	0.9
VT	0	NM	3.8	MN	2.5	HI	0	KY	3.9	HI	0	DC	0	DE	0	RI	1.2	AK	0
AK	0	MD	2.9	GA	0.6	AK	0	AK	0	OK	0	WY	0	AK	0	AK	0	WY	0
US	22.4		21.5		19.9		16.2		15.1		15		14.2		13.7		12.8		11

Source: Nursing Facilities, Staffing, Residents, and Facility Deficiencies, 1992 Through 1998. Harrington, Carrillo, Thollaug, Summers, Wellin; Department of Social and Behavioral Science, University of California, January 2000.

Table 5

TOP TEN MOST FREQUENTLY CITED DEFICIENCIES BY STATE FOR CERTIFIED FACILITIES																			
CALENDAR YEAR 1997																			
Food Sanitation		Comprehensive Assessments		Comprehensive Care Plans		Accidents		Pressure Sores		Quality of Care		Physical Restraints		Housekeeping		Dignity		Accident Prevention	
NV	55.3	NV	60.5	HI	57.1	AZ	43.2	AL	52	OR	38.2	NV	50.0	WI	705	WY	41.7	NV	28.9
DC	54.5	HI	59.5	NV	55.3	IN	37.6	DE	45.2	WA	37	ID	27.3	DC	50	CA	38.9	DE	26.2
AZ	53.4	WI	42.1	NH	45.3	IL	33.9	MI	35.5	KS	33.2	CA	25.3	AR	40	NV	34.2	CT	25.7
WY	47.2	ID	32.5	CA	41.1	MI	33.7	WA	31.9	ID	31.2	IN	25.2	AZ	34.7	SC	32	ID	23.4
AR	46.3	NH	32	AL	39.8	DE	31	ND	30.7	NV	28.9	MN	24.5	NV	31.6	WA	29	WA	23.2
SC	44.6	IL	31.9	SC	36.6	UT	30.8	AR	28.6	AK	28.6	AK	21.4	MI	30.3	ND	26.7	OR	23
CA	41.1	OR	30.3	DE	33.3	SD	30.7	NV	23.7	SC	28	SD	20.8	IL	25.7	HI	26.2	MI	22.4
MI	40.9	MN	29.1	WY	33.3	CA	28.8	SC	23.4	MD	26.5	WV	20.5	WA	25.7	NC	24.5	AK	21.4
WA	38.4	AK	28.6	AR	29.8	WA	27.9	KS	23.4	MI	26.4	OK	20.4	CA	25.1	FL	22.7	CA	19.3
ID	36.4	MS	28.4	ME	28.8	AR	24.7	CA	22.6	WV	25.6	AZ	19.5	ID	23.4	MI	18.5	IA	18.7
IL	32	ME	28	AK	28.6	MS	24.4	OH	22.2	CA	24.3	MI	19	TX	22.8	OR	16.4	KS	18.2
AL	31.6	CA	27.7	ID	27.3	KS	23.9	IL	21.5	VA	24.1	VT	18.9	KS	16.8	IN	16.4	PA	17.3
IN	30.7	IN	25	KS	27.2	SC	23.4	ID	19.5	AR	23.5	SC	17.7	GA	16.1	AZ	16.1	OH	15.8
FL	28.5	KY	23.5	FL	24.7	OH	22.7	CT	19.4	DC	22.7	WY	16.7	ND	16	IL	16	MA	14.4
WV	28.2	IA	22.4	IL	24.4	WY	22.2	OR	19.1	CT	22.5	IL	16.5	CO	15.4	UT	14.3	NC	14.2
ND	26.7	WA	21.7	KY	22.3	CO	18.8	MT	18.9	DE	21.4	WI	16.5	MS	13.9	DE	14.3	IL	13.7
UT	26.4	OH	21.6	CT	19	ME	17.6	MS	18.9	IA	19.2	AL	16.3	FL	13.9	AR	12.9	WI	13.5
KS	25.3	AL	21.4	IN	18.8	IA	17.4	NH	17.3	MT	17.9	ND	16	TN	12.6	AL	12.8	NH	13.3
SD	24.8	RI	20.7	VA	18.6	ID	16.9	IA	17	UT	17.6	KS	15.5	RI	12	ID	11.7	IN	12.2
TX	23.9	SC	20	LA	18.4	WI	16.3	HI	16.7	NC	17.4	RI	15.2	SC	11.4	WV	11.5	ND	12
HI	23.8	MA	20	PA	18.3	OR	14.5	FL	15.6	GA	16.7	PA	14.5	OK	11	NY	10	RI	12
LA	21.7	FL	20	ND	17.3	AK	14.3	VA	15.6	ME	16	NM	14.3	NC	10.8	NM	9.5	VA	11.8
GA	21.7	WY	19.4	IA	16.5	AL	13.8	TN	14.4	TX	14.7	AR	14.1	IN	10.6	MN	9.5	AL	11.7
DE	21.4	KS	19	OK	15.7	TX	13.3	WY	13.9	WI	13.8	WA	14.1	MO	10.4	OH	9.3	FL	10.3
OK	20.4	SD	18.8	MO	15	PA	12.3	DC	13.6	PA	13.2	MA	13.2	IA	9.8	KS	9.2	MT	9.5
TN	20.2	OK	18.3	MS	14.4	RI	12	VT	13.5	IL	12.2	FL	12.7	ME	9.6	LA	9.2	SC	9.1
IA	18.7	AR	18	WV	14.1	TN	11.1	TX	12.9	ND	12	OR	12.5	OR	8.6	DC	9.1	NY	9
ME	18.4	WV	16.7	OH	13.2	GA	10.4	MO	12.8	NH	12	OH	12.5	WY	8.3	MO	8.8	TX	8.8
NC	17.4	MO	14.8	WI	13	FL	9.5	IN	12.8	FL	11.6	HI	11.9	NY	8.1	NJ	8.6	VT	8.1
MS	17.4	ND	14.7	AZ	12.7	WV	9	NY	12.6	NE	11.6	KY	11.9	UT	7.7	GA	7.7	SD	7.9
OH	16.4	NJ	14	WA	12.7	NC	8.7	OK	12	IN	11.1	DE	11.9	LA	7.4	MT	7.4	MO	7.8
RI	16.3	MT	13.7	TN	11.7	NE	8.2	NE	11.2	MN	10.1	CO	10.6	AK	7.1	AK	7.1	NJ	7.2
MO	16.1	DC	13.6	OR	11.2	VA	8	CO	11.1	CO	9.6	NY	9.4	KY	6.9	PA	7	GA	7
CO	15.4	TN	13.2	NJ	9.9	NV	7.9	MD	10.7	WY	8.3	IA	9.1	OH	6.2	VA	6.8	MD	6.5
AK	14.3	CO	13	NM	9.5	KY	7.7	PA	10.7	VT	8.1	TX	8.4	MD	6	TX	6.8	KY	6.5
MD	13	CT	11.5	TX	9.4	MO	7.3	RI	9.8	NY	7.7	NJ	7.5	SD	5.9	WI	6.5	NE	5.6

Table 5

TOP TEN MOST FREQUENTLY CITED DEFICIENCIES BY STATE FOR CERTIFIED FACILITIES																			
CALENDAR YEAR 1997																			
Food Sanitation		Comprehensive Assessments		Comprehensive Care Plans		Accidents		Pressure Sores		Quality of Care		Physical Restraints		Housekeeping		Dignity		Accident Prevention	
OR	11.8	NC	11.3	DC	9.1	HI	7.1	LA	8.9	OH	7.3	MO	7.5	NH	5.3	IA	6.4	WV	5.1
PA	11.2	AZ	10.2	SD	8.9	NY	6.6	WI	8.8	TN	7.3	ME	7.2	PA	4.3	CO	6.3	AR	5.1
KY	10.4	LA	8	NE	7.3	OK	6.5	GA	8.7	MO	7.1	NC	6.9	NJ	3.8	KY	6.2	DC	4.5
VA	9.3	NM	6.3	MA	6.6	LA	5.9	KY	7.7	AL	7.1	NE	6.4	MT	3.2	MS	5.5	MS	4
NH	8	VT	5.4	NY	5.6	MD	5.1	MA	7.6	MS	7	VA	5.5	WV	2.6	NH	5.3	NM	3.2
NE	8.6	GA	5.7	CO	5.8	MT	5.3	WV	7.7	HI	7.1	MT	6.3	NM	3.2	VT	5.4	ME	4
WI	7.5	DE	4.8	MD	5.6	DC	4.5	MN	7.2	NJ	6.5	MS	5	MN	2.6	TN	5.3	LA	3
NY	6.8	TX	4.6	MI	4.2	MN	3.9	SD	6.9	AZ	5.9	TN	5	CT	2.4	ME	4.8	CO	2.9
MT	6.3	MI	4.2	NC	4.2	ND	2.7	UT	6.6	RI	5.4	DC	4.5	HI	2.4	OK	4.7	WY	2.8
NJ	5.5	NE	3.4	RI	3.3	NH	2.7	NC	5.8	SD	5	CT	4.3	VA	2.1	NE	4.3	MN	2.8
VT	5.4	NY	2.4	VT	2.7	VT	2.7	ME	5.6	LA	4.7	NH	4	MA	1.7	MD	4.2	TN	1.8
NM	4.8	PA	2.3	MT	2.1	MA	2.5	NJ	5.1	KY	4.6	LA	3	NE	1.3	CT	4	AZ	1.7
MA	3.4	MD	1.4	UT	1.1	NJ	2.1	NM	4.8	MA	1.1	GA	2.7	AL	0.5	SD	3	OK	0.3
MN	3.1	UT	1.1	GA	1	NM	1.6	AZ	3.4	OK	0.8	MD	2.3	DE	0	MA	2.6	UT	0
CT	2.4	VA	0.8	MN	0.8	CT	1.2	AK	0	NM	0	UT	1.1	VT	0	RI	2.2	HI	0
US	21.8		17.3		17.1		16.6		16.1		14.4		13.5		13.3		13.2		11.9

Source: Nursing Facilities, Staffing, Residents, and Facility Deficiencies, 1992 Through 1998. Harrington, Carrillo, Thollaug, Summers, Wellin; Department of Social and Behavioral Science, University of California, January 2000.

Table 6

TOP TEN MOST FREQUENTLY CITED DEFICIENCIES BY STATE FOR CERTIFIED FACILITIES																			
CALENDAR YEAR 1998																			
Food Sanitation		Comprehensive Assessments		Comprehensive Care Plans		Accidents		Pressure Sores		Dignity		Physical Restraints		Housekeeping		Accident Prevention		Quality of Care	
DC	78.6	HI	63.6	HI	54.5	WY	37.5	MI	30.7	HI	43.2	MA	126	DC	64.3	DE	44.4	WA	46.1
NV	65.9	NV	41.5	SC	46	AZ	36.4	WA	30.3	CA	36.7	AK	42.9	AR	36.4	OR	32.9	DE	40.7
MI	46.7	WI	35.9	ME	44.9	MI	35.8	SC	29.4	WY	32.5	DE	29.6	MI	33.5	CT	32.9	OR	40
ID	45.1	AL	29.6	VA	40.3	IN	35.6	KS	28.8	NC	29.9	IN	26.5	WA	33.2	MI	32.5	WV	37.7
AR	41.1	MT	29.3	AL	38	SD	34.9	NV	26.8	UT	29.2	MI	25.6	ID	30.4	NV	31.7	CT	36.4
WA	40.2	OR	29	KY	33.6	WA	33.6	ID	25.3	NV	26.8	NV	24.4	MS	29	ID	30.4	NV	34.1
CA	39.9	MS	28	DE	33.3	MS	32.5	IL	25.1	WA	26.2	SD	23.3	CA	28.8	WA	28.8	ID	31.6
SC	38	KY	28	NH	28	CA	31.7	HI	25	DE	25.9	MT	22.8	AZ	27.9	KS	25.3	KS	31.5
AZ	38	WY	27.5	AR	25	IL	30.2	CA	24.4	FL	24.7	WY	22.5	KY	25.7	ND	25	SC	31.3
SD	34.9	SC	25.8	FL	24.8	UT	28.1	AL	23.1	NM	24.2	CA	21.4	GA	24.3	CA	24.3	MI	29.4
IN	34.1	IN	25.7	NV	24.4	KS	24.3	CT	23.1	SC	23.3	OK	21.2	IL	23.7	OH	23	CA	28.8
IL	33.9	SD	25.6	PA	22.9	ID	24.1	AR	22	ND	22.7	WA	19.6	TX	22.4	PA	20.3	VA	26
AL	32.9	AZ	24	IA	22	SC	23.9	ND	21.6	IL	21	MN	17	RI	21.3	AL	19.9	AR	25.8
TN	31.8	MN	23.2	NM	21.2	AR	23.3	OH	20.9	MI	20.8	AR	16.9	TN	20.1	MA	19.3	MD	25.7
FL	30.5	ME	22.9	CA	20.9	DE	22.2	FL	20.5	ID	19	KY	16.4	NV	19.5	MT	17.4	NC	23.9
GA	30.3	CA	20.8	KS	17.8	NV	22	IN	18.7	IN	18.3	ND	15.9	SC	17.2	IN	17	DC	21.4
WY	30	ID	20.3	MO	17.2	WI	21.5	DE	18.5	OR	14.8	FL	15.5	CO	16.5	IA	16.7	GA	20.9
RI	29.2	RI	20.2	CT	16	OH	21.5	NE	17.8	MN	14.5	AZ	15.5	SD	15.1	IL	15	IN	20.4
KY	28.3	IA	19.3	WI	15.9	IA	20.8	MS	16.5	KY	14.1	ME	15.3	ND	14.8	NC	13.8	FL	20.3
MO	28.2	IL	18.6	IN	15.6	TN	17.5	MT	16.3	AZ	13.2	OR	14.8	KS	13.5	MO	13.4	MT	19.6
UT	25.8	AR	18.2	OH	14.8	GA	17.4	SD	16.3	AR	12.7	WV	14.5	FL	13.3	MN	13	WI	19.2
TX	24.2	OH	17.8	IL	14.3	CO	17	PA	16.1	ME	12.7	KS	14.3	NM	10.6	WI	12.6	ME	18.6
NC	23.4	FL	17.7	DC	14.3	KY	16.4	NH	16	VT	11.8	ID	13.9	OK	10.4	VT	11.8	IA	18.6
KS	23.3	WA	17.7	MS	14	RI	15.7	OR	15.5	WV	11.6	HI	13.6	OH	10.2	VA	11.3	TX	16.4
ND	22.7	WV	17.4	LA	13.6	ME	15.3	MO	15	OH	10.8	WI	13.1	NC	9.9	MD	11.1	NE	16.1
LA	22.4	VA	17.3	TN	13.5	PA	14.4	VA	14.7	MO	10.6	IL	12.7	HI	9.1	GA	11.1	MN	15.7
DE	22.2	MA	15.3	OR	12.3	DC	14.3	MN	14.2	AL	9.7	VA	12.6	IA	8.1	SD	10.5	PA	14.9
WV	21.7	TN	14.3	NE	12.2	TX	14	KY	13.8	LA	9.1	VT	11.8	ME	7.6	FL	10	ND	13.6
AK	21.4	OK	13.8	MT	12	NM	13.6	IA	13.6	KS	9	AL	11.6	LA	7.4	KY	9.9	NH	13.3
NM	21.2	NH	13.3	OK	11.4	MN	12.7	AZ	13.2	TN	8.3	PA	11.6	PA	7.1	WV	8.7	IL	12.7
OH	19	ND	12.5	SD	10.5	AL	11.6	NC	12.7	TX	7.5	OH	11.1	AK	7.1	SC	8.6	KY	12.2
MS	18.5	MO	12.2	ID	10.1	FL	10.8	UT	12.4	OK	7.4	NC	10.9	NH	6.7	MS	7.5	NM	12.1
HI	18.2	NJ	9.8	WY	10	NE	10.4	RI	12.4	PA	7.2	RI	10.1	WI	6.2	AK	7.1	HI	11.4
IA	17.7	CT	9.3	TX	9.8	NC	9.9	NY	12.2	AK	7.1	SC	9.8	NY	5.9	DC	7.1	MS	11
OK	15.2	NC	9.1	AZ	9.3	HI	9.1	TX	12	NY	7	TX	8.3	IN	5.6	TX	7	NY	10.2

Table 6

TOP TEN MOST FREQUENTLY CITED DEFICIENCIES BY STATE FOR CERTIFIED FACILITIES																			
CALENDAR YEAR 1998																			
Food Sanitation		Comprehensive Assessments		Comprehensive Care Plans		Accidents		Pressure Sores		Dignity		Physical Restraints		Housekeeping		Accident Prevention		Quality of Care	
PA	13.5	CO	9	UT	9	MD	8.8	VT	11.8	SD	7	NY	8	MO	5.4	NE	7	UT	10.1
NE	13.5	VT	8.8	WA	8.5	MT	8.7	TN	11.5	MD	7	IA	7.9	WY	5	NH	6.7	AL	9.7
WI	12.1	DE	7.4	NJ	8.2	MO	8.4	LA	10.9	GA	6.9	NM	7.6	MN	4.7	AR	6.4	TN	9.5
CO	11.3	AK	7.1	AK	7.1	OR	8.4	OK	10.8	NJ	6.9	CO	7.5	MT	4.3	NY	6.3	RI	9
ME	9.3	DC	7.1	MI	6.6	AK	7.1	NM	10.6	WI	6.4	DC	7.1	CT	4	AZ	6.2	NJ	7.2
MT	8.7	KS	6.8	NC	6	ND	6.8	CO	10.4	CO	6.1	NE	6.5	AL	3.7	WY	5	OH	6.5
NY	8.1	NE	6.5	VT	5.9	LA	6.5	MA	10.3	MS	6	MO	5.8	MD	3.5	NJ	4.9	MO	6.4
NH	8	LA	6.2	MD	5.8	OK	6.4	MD	9.9	VA	5.6	MS	5	OR	3.2	NM	4.5	CO	6.1
NJ	7.2	NM	6.1	ND	4.5	NY	5.9	GA	9.7	MT	5.4	NJ	4.6	NE	3	RI	4.5	AZ	5.4
OR	7.1	MI	5.6	WV	4.3	NH	5.3	WI	8.5	NE	5.2	TN	4	VT	2.9	TN	3.7	LA	3.5
MN	6.7	GA	5.1	CO	4.2	CT	4.4	WY	7.5	RI	4.5	UT	3.4	WV	2.9	CO	3.3	VT	2.9
VA	6.5	PA	4.3	MA	2.9	NJ	4.2	DC	7.1	IA	4.3	LA	3.2	NJ	2.9	OK	2.4	MA	2.7
VT	5.9	TX	3.9	NY	2	VT	2.9	NJ	5.9	CT	4	CT	3.1	UT	2.2	HI	2.3	OK	2.4
MD	5.8	MD	2.3	MN	1.2	WV	2.9	ME	4.2	MA	4	GA	3.1	VA	0.9	LA	2.1	SD	2.3
MA	5.2	UT	2.2	GA	1.1	MA	2.3	WV	2.9	NH	1.3	NH	2.7	MA	0.2	ME	1.7	AK	0
CT	3.6	NY	1.3	RI	1.1	VA	2.2	AK	0	DC	0	MD	1.2	DE	0	UT	1.1	WY	0
23.7		15.1		15.2		18		17.1		14.1		12.7		14.4		14.7		17.2	

Source: Nursing Facilities, Staffing, Residents, and Facility Deficiencies, 1992 Through 1998. Harrington, Carrillo, Thollaug, Summers, Wellin; Department of Social and Behavioral Science, University of California, January 2000.

Table 7

Citation Definitions		
Citation	F-Tag	Definition
Accidents	F323	Providers must ensure the facility is free from hazards that would cause an accident.
Accident Prevention	F324	Residents receive adequate supervision and assistive devices to prevent accidents.
Comprehensive Assessments	F272	Assessment of a resident's needs such as routine, cognitive patterns, communication, vision, mood and behavior patterns, psychosocial well being, physical functioning and structural problems, continence, disease diagnosis, dental and nutritional status, medications, special treatments, discharge potential.
Comprehensive Care Plans	F279	Development of a comprehensive care plan for each resident that includes measurable objectives and timetables to meet a resident's medical, nursing and mental psychosocial needs that are identified in the assessment.
Dignity	F241	Assistance is to be provided to residents for grooming, dressing appropriately and dining. Staff should act and speak respectfully.
Food Sanitation	F371	Storing, preparing, and serving food must be done in a sanitary way to prevent food- borne illnesses.
Housekeeping	F253	Providers must maintain a sanitary, orderly and comfortable setting.
Physical Restraints	F221	Mechanical devices, materials, or equipment that restricts freedom of movement or normal access to one's body. Restrains are not to be used for discipline or convenience or to treat medical symptoms.
Pressure Sores	F314	Providers must try to prevent residents without pressure sores from developing them.
Quality of Care	F312	Residents who are not capable must be provided assistance with grooming and personal hygiene.
Unnecessary Drugs	F329	Drugs used in excessive doses, for excessive duration, without monitoring, or used in the presence of adverse consequences.

Source: Code of Federal Regulations. Government Printing Office Web Page: www.access.gpo.gov